

DEPARTMENT FOR PUBLIC HEALTH

REQUEST FOR APPROVAL

KY 2010 9-27/589

1. Type of Document: Grant application

2. Justification US Dept of Health and Human Services, Centers for Disease Control and Prevention, Patient Protection and Affordable Care Act State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System. See attached Executive Summary.

3. Funding
State GF

Federal
Funds

Agency
Funds

Other Funding Source
(Explain)

4. Submitted by:

Dune Center 8/26/2010
(Date)

5. Branch Approval

NA
(Date)

Division program
contact for

6. corrections/questions

Rebecca Aufderhar

Ext.

4043

Division Budget

7. Analyst if applicable

(Date)

8. AFM State Budget

Nicole Bridges 8/30/10
(Date)

AFM LHD Budget
(*LHD Contract or MOD

9. Only)

10. Division Approval:

(Date)

Greg Martin 8-27-10
(Date)

Division contact for
document pick-up:

Rebecca Aufderhar

Ext.

4043

11. **Contract or Modification Only:** Submit to Contracts and Payments Branch

- Steps 1-10 must be complete; submit only original signatures
- Program staff may wish to scan or copy documentation before submitting
- Requests will be logged into tracking tool
- Contracts and Payments staff will submit to Commissioner's Office for approval.

12. Commissioner's Office
Department Approval:

Greg Martin
(Date)

8/30/10

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Department Approval:

(Date)

13. *DPH Form Request for Approval 3.0101 Replaces DPH Forming 3.0101*
08/27/10
(DATE)

Greg Martin
Greg Martin

**State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control,
Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System
Funding Opportunity Number: RFA-DP09-90101SUPP10**

Kentucky has the highest rate in the nation for adult current smoking (25.7%), high school current smoking (27.0%), smoking among persons with diabetes (23%), lung cancer incidence (99.5/100,000) and lung cancer mortality (77.2/100,000). On the positive side, current smoking has decreased from a high 32.6% in 2002 to the current rate of 25.7%. Each year more than 8,000 Kentuckians die of illnesses caused by tobacco use. At current youth smoking rates, over 88,000 Kentucky children under the age of 18 who currently smoke will die prematurely from their addiction. Approximately 1 in 4 pregnant women in Kentucky smoke, resulting in a higher proportion of low birth weight babies and infant mortality. Annually, over \$1.2 billion is spent in Medicaid and Medicare funds to treat Kentuckians for illnesses caused or made worse by their use of tobacco products. The amount is equal to \$300 per capita.

Prior to 2005, cessation resources for Kentuckians were limited to behavioral modification groups and individual counseling by health care providers. With funding from the Centers for Disease Control and Prevention, Kentucky's first quitline began in July 2005. Another cessation option for Kentuckians is www.becomeanex.org. The EX Campaign is an initiative by the National Alliance for Tobacco Control (NATC). Kentucky joined the NATC in October 2009. The 2009 BRFSS data indicated the percent of quit attempts have increased to 51.2%.

The Kentucky Tobacco Program has a staff of five: the Program Manager, Quit Line Contract Coordinator, Nurse Consultant, Epidemiologist, and a Health Policy Specialist. We

currently have one vacant position that is pending approval. We have three staff that has a total of twenty-three years experience in tobacco control. Public Health leadership is supportive of tobacco control activities and actively involved in promoting policy development to reduce tobacco use in Kentucky.

Several years ago, the Obesity Prevention Program established a worksite wellness coordinator position. The Worksite Wellness Coordinator, Teresa Lovely, works jointly with the Kentucky Chamber of Commerce and the Department for Public Health to promote healthy lifestyles in worksites through healthy eating, exercise, and smokefree policy. We will collaborate with the Worksite Wellness Coordinator to strengthen the creditability and increase the chances for employers to participate. We will hire a part-time Program Coordinator to follow-up with Kentucky Association of Health Underwriters' leadership team, members, and employers; develop a database (with input from our epidemiologist); and coordinate with the Worksite Wellness Coordinator.

Since 2002, the Tobacco Program has partnered with the Kentucky Cancer Program (KCP) at the University of Louisville to offer educational programs for health care providers. This partnership promoted the recommendations of the U.S. Public Health Service's Clinical Practice Guideline *Treating Tobacco Use and Dependence*, with over 4000 Kentucky providers receiving training to date (not including students). Efforts have included a video self-study kit featuring expert testimonials from Kentucky physicians, dentists, other advanced clinicians, and public health officials; provide didactic presentations and trainings incorporating standardized patients for experiential learning; develop newsletters, journal articles, and other educational materials.

In 2005, we developed a two-year pilot project to increase inpatient tobacco use treatment. Components include a baseline survey of hospitals, the selection of five pilot hospitals; standing orders for nicotine replacement therapy and other pharmacotherapy; standardization of materials and referrals, and evaluation. In addition to the Tobacco Program, partners in the development and evaluation of the pilot were the American Heart Association, Kentucky Hospital Association, Healthcare Excel, and the University of Louisville's Kentucky Cancer Program. An offshoot of the pilot project was a toolkit and web module for hospitals. The toolkit contains the Quick Reference Guide for Clinicians 2008 Update of Treating Tobacco Use Dependence, a CD with short vignettes featuring health care providers and hospital administrators, a quitline informational CD, and a step-by-step guide to going tobacco-free.

The Department for Public Health Division of Administration and Financial Management (AFM) works closely with the Tobacco Program to ensure accurate financial reporting. The Tobacco Program Manager develops and monitors contract deliverables, approves invoices, tracks expenditures, and meets quarterly with AFM staff to review year-to-date expenditures.

The Tobacco Program has a strong network of internal and external partnerships that support infrastructure and policy development. Partnerships not only share resources but also develop plans that integrate strategies consistent with tobacco control best practices.

We are developing a plan with the Kentucky Association of Health Underwriters (KAHU) to inform health insurers and employers about cessation options for their members/employees. The KAHU has four state chapters with approximately three hundred and seventy-five (375) members. We will present the plan to distribute information to KAHU members (primarily health insurers and insurance brokers) who will share the packets with their clients. Below are the goals for the project as well as specific activities.

Goals:

1. Increase the number of health insurers who offer cessation to their employees and members.
2. Increase the number of employers who refer employees to the quitline.
3. Increase the number of employers who offer cessation counseling options to their employees.
4. Increase the number of quit attempts among current adult tobacco users.

Activities:

Kentucky Association of Health Underwriters

1. Present proposal to Kentucky Association of Health Underwriters (KAHU).
2. Distribute information packet to the four KAHU Chapters.
3. Send monthly reports to KAHU that includes the number of employers who are enrolled in the Preferred Network Provider program and the number of quitline referrals from each employer.
4. Monthly conference calls with KAHU to discuss promotion and results.

Employers

1. Process application to become a Preferred Network Provider.

2. Send packet to employer that includes a letter outlining resources and program support, quitline promotional materials, fax referral form, materials order form, cessation fact sheet, secondhand smoke fact sheet, and a guide for worksite wellness.
3. Follow-up calls to employer from the state Quitline Coordinator and the state Worksite Wellness Coordinator.
4. Quarterly reports to employers on the number of employees enrolled in counseling, quit attempts, and quit rates.

Kentucky's Tobacco Quitline offers proactive quitline services to all callers age 15 and over. Hours of services were expanded from 60 hours per week to 119 hours per week in April 2010. Services are available in English and Spanish at the time of the call. Counseling in other languages is available free through a third party translation service. Services are also available for the deaf and hard-of-hearing. Kentucky's quitline went operational July 1, 2005; our current vendor is National Jewish Health.

Our communications plan includes a listserv, monthly conference calls, webinars, teleconferences, and in-person meetings. In addition to participating in the EX campaign and a radio ad campaign to promote the quitline, we rely heavily on earned media at the state and local level. For this project, the Kentucky Association of Health Underwriters and the state tobacco control program will issue a joint press release, present at the Kentucky Association of Health Underwriters' Annual Meeting and to each of the four Kentucky Chapters.

The Kentucky Tobacco Program will utilize an outcomes-based evaluation plan to assess the program on short-term, intermediate, and long-term objectives. Observational in nature, the evaluation design will include baseline data from periodic cross-sectional surveys (e.g. Behavioral Risk Factor Surveillance System), and perform case studies to assess changes in

tobacco control capacity in disparate population groups. Coinciding with the Centers for Disease Control and Prevention's (CDC) four goals for reducing the negative health effects of tobacco use, the Kentucky Tobacco Program has developed logic models to evaluate progress in promoting cessation among youth and adults. Below is the logic model and evaluation plan for program goals.

The Program Coordinator will participate in all training activities including conference calls, webinars, and conferences as directed by the Centers for Disease Control and Prevention. In addition to CDC sponsored events, the Program Coordinator will receive a thorough orientation in tobacco control issues and resources in Kentucky from our staff and partners.

APPENDIX A

State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control,
Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System
Funding Opportunity Number: RFA-DP09-90101SUPP10

A. SALARIES AND WAGES \$39,555.96

Personnel

Position Title and Name	Annual	Time	Months	Amount Requested
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Year 1

Program Coordinator	\$39,555.96	50%	12 months	\$19,777.98
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Year 2

Program Coordinator	\$39,555.96	50%	12 months	\$19,777.98
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Justification

B. FRINGE BENEFITS \$18,319.33

Year 1 \$8,878.82

FICA 7.65%

Retirement 16.98%

Health Insurance \$8000 Annual

Life Insurance \$15 Annual

Year 2 \$9,440.51

FICA 7.65%

Retirement 19.82%

Health Insurance \$8000 Annual

Life Insurance \$15 Annual

C. CONSULTANT COSTS \$0.00

APPENDIX A

State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control,
Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System
Funding Opportunity Number: RFA-DP09-90101SUPP10

D. EQUIPMENT	\$0.00
E. SUPPLIES	\$0.00
F. TRAVEL	\$1852.72

In-State Travel:

9 trips x 1 person x 1504 miles r/t x .43/mile = \$ 646.72

Out-of-State Travel:

1 trip x 1 person x \$600 r/t airfare = \$600

3 days per diem x \$36/day x 1 person = 108

3 nights lodging x \$146 night x 1 person = 438

Ground transportation 1 person = 60

Total \$1206

Justification

The Tobacco Program staff person responsible for coordinating the project will present at the annual conference of the Kentucky Association of Health Underwriters (KAHU) and to each of the four state chapters at least twice during the next 24 months. The next annual conference is scheduled for April 20, 2011 in Louisville.

One trip to Atlanta is budgeted to allow for one Tobacco Program staff person to attend CDC training as required by the grant.

APPENDIX A

State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control,
Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System
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G. OTHER

\$4,000.00

Postage

\$ 45 per month x 20 months = \$900.00

Printing

Customized fax referral form \$1,025

Materials order form \$1,025

Tobacco cessation resource guide \$1,050

Justification

Printing costs are estimates based on previous printing jobs done through the state agency. The materials will be used in packets for health underwriter members and employers.

H. CONTRACTUAL COSTS

\$63,728.01

I. TOTAL DIRECT COSTS

Personnel	\$39,555.96
Fringe	\$18,319.33
Travel	\$1,852.72
Supplies	\$0.00
Contracts	\$0.00
Other	\$4,000.00
	\$63,728.01

APPENDIX A

State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control,
Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System
Funding Opportunity Number: RFA-DP09-90101SUPP10

J. INDIRECT COSTS

The rate is 21% and is computed on the following direct cost base of \$39,555.96.

K. TOTAL DIRECT AND INDIRECT COSTS

\$72,034.76

Personnel	\$39,555.96
Fringe	\$18,319.33
Travel	\$1,852.72
Supplies	\$0.00
Contracts	\$0.00
Other	\$4,000.00
	\$63,728.01
Indirect	\$8,306.75
	\$72,034.76

APPENDIX B

State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control, Diabetes Prevention and Control, and Behavioral Risk

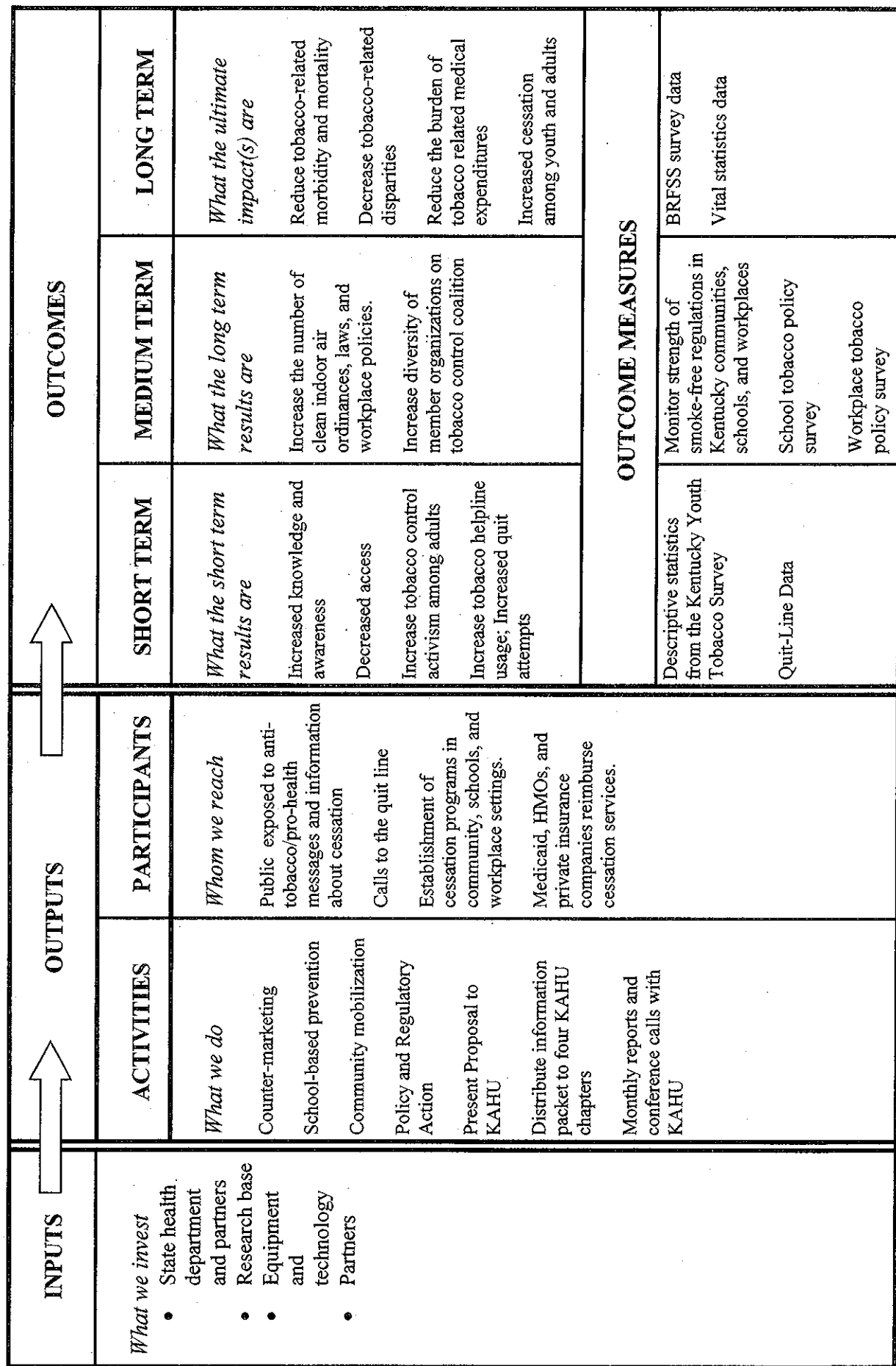
Factor Surveillance System

Funding Opportunity Number: RFA-DP09-90101SUPP10

Evaluation Logic Model for Reducing Youth Initiation

Assumptions: Tobacco use is the single most preventable cause of death and disease; most people begin using tobacco in early adolescence and most would consider utilizing cessation resources; Best practices for comprehensive community-based tobacco control programs include engaging youth, developing partnerships, educational programs, and promoting clean indoor air policies, restrict access to tobacco products, provide coverage for treatment; comprehensive tobacco control programs produce substantial reductions in tobacco use; effectiveness and accountability require strong evaluation and management.

Goal(s): Increase the number of health insurers who offer cessation to their employees and members; increase the number of employers who refer employees to the quitline; increase the number of employers who offer cessation counseling options to their employees; increase the number of quit attempts among current adult tobacco users.





DEPARTMENT OF HEALTH & HUMAN SERVICES

Program Support Center
Financial Management Service
Division of Cost Allocation

Cohen Building-Room 1067
330 Independence Avenue, S.W.
Washington, DC 20201
PHONE: (202)-401-2808
FAX: (202)-619-3379

August 2, 2006

Mr. Mike Burnside
Undersecretary, Administrative and Fiscal Affairs
Kentucky Cabinet for Health and Family Services
275 E. Main Street, 5W-A
Frankfort, KY 40621

Dear Mr. Burnside:

This is to advise you of the conditional approval of the following Amendments to the Kentucky Cabinet for Health and Family Services Cost Allocation Plan.

# 97-6	Effective date not stated, submitted May 20, 2004
# 05-0	Effective July 1, 2004
# 05-1	Effective August 1, 2005

We are approving these amendments with the exception of the Random Moment Sampling (RMS) recall time log methodologies. Until such time as we are able to make a determination as to whether the procedures and methodologies proposed in Amendment 05-2 incorporates revisions necessary to meet the requirements of HHS record keeping requirements and OMB Circular A-87. These methodologies must be approved by both ACF and DCA.

In accordance with 45 CFR Part 95 Subpart E, this Approval is continuous until the allocation methods shown in the plan become out dated as a result of organizational changes within your department, legislative or regulatory changes, or a new plan is submitted by you. The regulations require that as a condition of receipt of Federal Financial Participation in administration services (excluding assistance and medical vendor payments and purchased services) and training for any quarterly period, the State's claim for expenditures must be in accordance with the Cost Allocation Plan on file and approved by the Director, Division of Cost Allocation, for that period. Amendments to your plan would be required for any changes indicated above. The sole responsibility for submitting proposed revisions rests with the State.

Approval of the Plan Amendment cited above is predicated upon the following conditions (1) that no costs other than those incurred pursuant to the approved State plan are included in claims

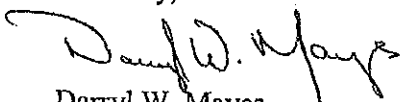
to Department of Health and Human Services or other Federal Agencies and that such costs are legal obligations, (2) that the same costs that have been treated as indirect costs have not been claimed as direct costs, and (3) that similar types of costs have been accorded consistent treatment.

This approval presumes the existence of an accounting system with internal controls adequate to protect the interests of both the State and Federal Governments. This approval relates to the accounting treatment accorded the costs of your programs only, and nothing contained herein should be construed to approve activities not otherwise authorized by approved program plans, Federal legislation or regulations.

The operation of the Cost Allocation Plan approved by this document may from time to time be reviewed by authorized Federal staff, including the Division of Cost Allocation, operating divisions, DHHS Office of Inspector General for Audit Services, the Department of Agriculture, the Department of Labor, and the General Accounting Office. The disclosure of inequities during such reviews may necessitate changes to the plan.

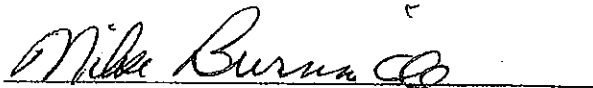
Please sign the original of this letter in the space provided to indicate your concurrence and return it to this office. In doing so, this letter becomes a part of the approved plan. If we may be of further assistance, please contact Christian Poole or me at (202) 401-2808.

Sincerely,

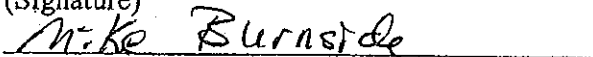


Darryl W. Mayes
Director, Mid-Atlantic Field Office
Division of Cost Allocation

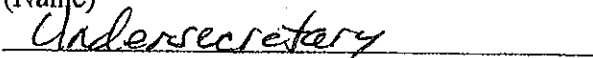
CONCURRENCE:



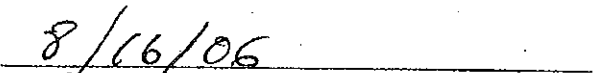
(Signature)



(Name)



(Title)



(Date)

Amendment 97-6 was requested without an implementation date; subsequently we have submitted Amendment 05-2 with an implementation date 10/1/06 to replace Amendment 97-6.



Kentucky Association of Health Underwriters

NAHU is an association of health and disability insurance professionals serving the needs of over 119 million Americans.

August 27, 2010

Ms. Irene Centers
Tobacco Prevention and Cessation
Department for Public Health
275 E. Main Street, HS1E-E
Frankfort, KY 40621

Re: State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System
Funding Opportunity Number: RFA-DP09-90101SUPP10

Dear Irene,

Thank you for reaching out to the Kentucky Association of Health Underwriters regarding a joint effort to promote Tobacco Cessation to our employer groups in the Commonwealth of Kentucky. As an organization we are always searching for programs that we can promote to our clients in an attempt to aide their population to become healthier. We all know what a wide spread health risk tobacco usage is in our state and I am very excited to have another avenue to assist Kentuckians in kicking the habit. I know that this grant will go a long way in providing funds to communicate and support this program.

I look forward to meeting with you on September 15th to discuss this opportunity in greater detail.

Good luck in your efforts to obtain the funding you are working towards.

If I can be of any additional assistance, please do not hesitate to give me a call.

Sincerely,

Leesa K. Hayes
President
Kentucky Association of Health Underwriters

August 27, 2010



Irene Centers
Program Manager, Tobacco Prevention and Cessation
Department for Public Health
275 E Main Street, 4W-E
Frankfort, KY 40621-0001

RE: Funding Opportunity Number: RFA-DP09-90101SUPP10.

Dear Irene,

On behalf of the Kentucky Cancer Consortium, I am pleased to provide this letter of support for the Tobacco Prevention and Cessation Program's application for *State Supplemental Funding for Healthy Communities, Tobacco Prevention and Control, Diabetes Prevention and Control, and Behavioral Risk Factor Surveillance System*.

As you know, the Kentucky Cancer Consortium has selected tobacco prevention as one of our top two priorities to implement collaboratively based on a review of our cancer and risk factor data. Our state Cancer Plan contains several objectives focusing on tobacco prevention and control including youth prevention, adult cessation, secondhand smoke, funding and infrastructure.

A multi-faceted approach to tobacco prevention and control is essential to reduce the burden of tobacco related illnesses, especially related to our cancer burden. We support your efforts to promote cessation to employers through the Kentucky Association of Health Underwriters' members. This funding opportunity addresses adult cessation, funding and infrastructure-related objectives in our Kentucky Cancer Action Plan. The additional resources that this funding opportunity provides will specifically help us meet our Cancer Action Plan Objective 1.5: "By 2013, reduce the proportion of adults age 18 and older who smoke from 28.2% to 25%."

Kentucky has the highest rate of smoking for men and women in the United States, as well as the highest rates of lung cancer incidence and mortality in the United States. As the greatest risk factor for lung cancer is smoking, by partnering with you on increasing cessation to employers, we are able to prevent duplication of limited services and better utilize scant resources.

We look forward to working with you in this important endeavor.

Sincerely,

A handwritten signature in cursive script that reads "Jennifer Redmond". The signature is written in dark ink and is located below the "Sincerely," text.

Jennifer Redmond, DrPH
Program Director, Kentucky Cancer Consortium



Kentucky Chamber
Uniting Business. Advancing Kentucky.

August 26, 2010

To Whom It May Concern:

As Kentucky's largest broad-based business association, the Kentucky Chamber of Commerce's core mission is to "unite business and advance Kentucky." Our program of work not only focuses on maintaining a positive regulatory and legislative environment from year-to-year, but also on developing a broader policy agenda to shape Kentucky's future.

As part of our efforts we have identified top five areas of focus for our strategic plan for 2008-11. One of those goals is "promoting wellness and healthy Kentuckians".

Kentucky continues to struggle with poor health status among its citizens. In its 2009 annual state health rankings, the United Health Foundation ranked Kentucky 41st among the states—down from 39th in 2008.

The Kentucky Chamber has worked closely with the Kentucky Department for Public Health since 2006 to provide employers with education in worksite wellness programming. In 2009, we invested the revision of the Kentucky Worksite Wellness Guide to provide an up-to-date resource for employers to implement successful wellness programs. That same year, we supported an increase in the cigarette tax in an effort to reduce smoking in the Commonwealth.

Employers are eager to become partners in battling Kentucky's risk factors as they continue to see their health insurance benefits costs rise and productivity fall with smoking-related illnesses. They need reliable turn-key resources they can use to educate their employees on smoking cessation.

A plan to provide employers with simple quit-line promotional materials, a guide to smoke-free worksites, a guide for worksite wellness and follow-up assistance will most certainly make an impact on this public health issue for our state. Reaching private employers through the Kentucky Department for Public Health Tobacco Program and partnering with the Kentucky Association of Health Underwriter's (KAHU) 375 members to inform health insurers and employers about cessation options for their members/employees will have a wide reach.

We support this effort and urge you to support Kentucky in its effort to battle this key risk factor for our citizens. Thank you for your consideration.

Sincerely,

Dave Adkisson
President & CEO

Teresa Lovely CHES

Experience

Business Coordinator for Worksite Wellness Development for Kentucky Department of Public Health/CDC Obesity Prevention Program and the Kentucky Chamber of Commerce Overall role is to educate private business concerning comprehensive worksite wellness program implementation and development. (5/2006- current)

**Vanderbilt University Medical Center/Logan Aluminum
Nashville, TN/ Russellville, KY**

**Title: Health Promotion/Wellness Coordinator/Manager (1999/98 to 5/2006)
Firefighter Fitness Coordinator (2003- 2006)**

Duties: Responsible for overall planning, organizing, coordinating, and directing 1000 employee/800 spouse fully developed, award winning Wellness Program. Duties include individual counseling, health and business case presentations, and health education classes.

Responsibilities included the over-all management of the corporate fitness center including training, equipment maintenance, individual instruction, etc. Lead, educate, and support 78-person wellness representative team. Lead 12-person Wellness Advisory committee involved in development of wellness program, and six unit wellness coordinators; initiate on-going involvement and support of middle management (business and production); work with upper management in the wellness program's role in business objectives, goals, and strategic planning,

Served on Executive Compensation/Benefits seven person task force appointed by company President to completely review full range of benefits and offer recommendations of a plan to fully integrate health plan, wellness, STD, LTD, WC and assure the most innovative, competitive compensation plan possible. Phase I health plan and wellness program.

Firefighter fitness - responsibilities include overall design, implementation, and day-to-day management of firefighter fitness program for about 60 firefighters. Duties include fitness testing, counseling, program recommendations, instruction, health education and follow-up of each individual fireman. Oversee fitness testing assistants and other certified exercise trainers.

TiaMark Enterprises Hopkinsville, KY

Title: Owner/Operator of company specializing in health services to individuals and organizations. (2/98 to 12/99)

Ladies Choice Weight Loss and Fitness Center Hopkinsville KY

Title: General Manager

Duties: Oversee/conduct day-to-day functions, exercise instruction, testing, and counseling. (10/97 to 12/97)

Pennyrile Racquetball and Health Club Hopkinsville, KY

Title: Wellness Director

Duties: Responsible for the development and implementation of a wellness program targeting local industry as well as 1200 client members. Exercise instruction and fitness testing. Also responsible for public relations and publicity. (2/96 to 10/97)

Logan Aluminum Russellville, KY

Wellness Program Coordinator Assistant (Internship) Wellness Program for Austin Peay, TN

Duties included data entry for wellness records, fitness testing, health counseling, exercise instruction, class instruction, and individual counseling. 5/5/95 to 7/31/95
Wellness assistant in paid position from 7/31/95 to 11/30/95 to finish out the year. (5/5/95 to 11/30/95)

Hopkinsville Community College Hopkinsville, KY

Wellness Assistant

Duties included exercise instruction, class instruction for students, staff, and faculty (part time and student basis)
(5/92 to 5/94)

Education

M.S. Health Promotion Management (graduate 12/2010)

Nebraska Methodist College

Omaha, NE

Graduate Certificate Health Promotion Management (2008)

Nebraska Methodist College

Omaha, NE

B.S. Health/ Wellness Promotion Emphasis (1995)

Austin Peay University

Clarksville, TN

Associates of Art (1994)

Hopkinsville Community College

Hopkinsville, KY

Certifications

Certified Health Education Specialist -CHES
(National Commission for Health Educators Credentialing 1996)
Arthritis and Exercise Instruction (98)
Lifestyle and Weight Management (American Council on Exercise, 1996)
Personal Trainer (Exercise) (American Council on Exercise, 1996)
Group Fitness Instructor (American Council on Exercise, 2002)
Clinical Exercise Specialist (American Council on Exercise 2004)
Health Promotion Director (Cooper Institute, 2004)
Certified Worksite Wellness Coordinator (NWI/WebMD 2006)
Certified Worksite Wellness Manager (NWI/WebMD 2006)
Certified Worksite Wellness Director (NWI/WebMD 2006)
Certified Wellness Speaker (2008)

Organizations/Boards

WELCOA (Wellness Councils of America) Member and serve on national practitioner advisory board
Western Kentucky University Wellness Task Force member
Western Kentucky External Advisory Council for Public Health Department

Presentations (Sample)

Ky. Chamber Worksite Wellness Conference(2008)

Coordinated School Health conference, Bowling Green, KY, presented "Implementing an Effective Worksite Wellness Program, School Setting Perspective", July, 2006

SHRM (Society of Human Resource Management) conference, "How to Implement an Effective Worksite Wellness Program", 2006

KCCE (KY Chamber of Commerce Executives) conference, presented "Implementing a Worksite Wellness; Chamber Perspective", 2006

Northern KY Chamber conference, presented "Implementing an Effective Worksite Wellness Program", Oct 2006

Healthy, Wealthy, and Wise Chamber event, Louisville KY, Presented and key note, "Why Worksite Wellness", Nov., 2006

Health Care Disparities conference, presented "Overview of Worksite Wellness Program and Health Plan Design", Louisville, 2005

National: Obesity in the Workplace conference, San Diego, CA with National HR organization presented "Worksite Wellness: Achieving High Levels of Participation", 2004

Accomplishments/Additional

Completed Wellness program research project with Vanderbilt staff in 2000

Worked with leading Wellness consultant Larry Chapman, Summex; with Logan Wellness program re-design and development (2000, 2002)

Completed program certification process earning Logan Wellness program highest-level recognition then offered (Gold)

Achieved high levels of HRA participation 99 -85%, 00-83%, 01- 93% on a voluntary basis

Grant study project (Health related topic) Western Ky: University Public Health Department (2003)

National recognition for wellness program achievement and health care costs savings (2003-2006)